

Application Data Sheet

**Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit::

Sequence submission?::

Computer Readable Form  
(CRF) ?::

Title:: BOTTLE WITH SPECIAL TOP FOR USE IN  
THE MEDICAL FIELD

Attorney Docket Number:: F-7785

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity:: Yes

**Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Marco

Middle Name::

Family Name:: SCHUPP

City of Residence:: Schwollen

State or Province of  
Residence::

Country of Residence:: Germany

Street of Mailing Address:: Hauptstrasse 65 A

City of Mailing Address:: Schwollen

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of  
Mailing Address:: 55767

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Harro

Middle Name::

Family Name:: WESTERMANN

City of Residence:: Koblenz

State or Province of  
Residence::

Country of Residence:: Germany

Street of Mailing Address:: ,  
Josef-Goerres-Platz 2

City of Mailing Address:: Koblenz

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of  
Mailing Address:: 56068

#### **Correspondence Information**

Correspondence Customer  
Number:: 000028107

#### **Representative Information**

Representative Designation::	Registration number::	Name::
Primary	22,389	C. Bruce Hamburg

#### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Germany	202 10 966.6	07/20/02	Yes
Germany	202 18 500.1	11/28/02	Yes